



One Hundred First Legislature - Second Session - 2010
Introducer's Statement of Intent
LB 1017

Chairperson: Rich Pahls
Committee: Banking, Commerce and Insurance
Date of Hearing: February 16, 2010

The following constitutes the reasons for this bill and the purposes which are sought to be accomplished thereby:

The intent of LB1017 is that every insured Nebraskan has access to reasonable prescription drug benefits by requiring that all health plans delivered or renewed on or after Jan. 1, 2011, meet the following criteria:

- Insurers cannot create specialty tiers that require payment of a percentage of prescription costs.
- Insurers cannot charge prescription drug co-pays that exceed the cost of that prescription to the health care plan, nor can they charge a co-pay that exceeds by 500 percent the lowest prescription drug co-pay in the plan.
- If a health plan includes a limit for out-of-pocket expenses for benefits other than prescription drugs, the insurer must include a provision that would result in the lowest out-of-pocket prescription drug cost to the subscriber. Either out-of-pocket expenses for prescription drugs would be included under the plan's total limit for out-of-pocket expenses or prescription drugs could not exceed \$1,000 per individual or \$2,000 per family for the contract year.

Principal Introducer:

Senator Abbie Cornett